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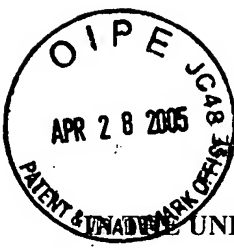
<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)		<b>Application Number</b>	10/781,219
		<b>Filing Date</b>	2/18/2004
		<b>First Named Inventor</b>	Backes
		<b>Group Art Unit</b>	
		<b>Examiner Name</b>	Not yet known
<b>Total Number of Pages in This Submission</b>		<b>Attorney Docket Number</b>	160-027

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) and letter <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
<b>Remarks</b>		Please charge any deficiency or credit any overpayment to Deposit Account No. 502569.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Mary Steubing, Reg. No. 37,946 Steubing McGuinness & Manaras LLP
Signature	<i>Mary Steubing</i>
Date	4/26/05

CERTIFICATE OF MAILING OR FACSIMILE			
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to Commissioner for Patents, Alexandria, VA 33212 or being facsimile transmitted to the United States Patent and Trademark Office at number (703) 872-9306 on the date below:			
Type or printed name	Christine M. Morrisette		
Signature	<i>Christine M. Morrisette</i>	Date	4-26-05

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UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Backes

Serial No.: 10/781,219

Filed: 2/18/2004

Title: Apparatus for Self-Adjusting Power at a  
Wireless Station to Reduce Inter-Channel  
Interference

Attorney Docket No.: 160-027

Group Art Unit:

Examiner:

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**INFORMATION DISCLOSURE STATEMENT**

Dear Sir:

This Information Disclosure Statement is submitted before mailing date of first office action on the merits.

Applicant(s) submit herewith Form PTO 1449-Information Disclosure Citation together with copies, of patents, publications or other information of which applicant(s) are aware, which applicant(s) believe(s) may be material to the examination of this application and for which there may be a duty to disclose in accordance with 37 CFR 1.56.

The relevance of the attached references is that this is the closest art of which Applicant is aware. Applicant submits that the above references taken alone or in combination neither anticipate nor render obvious the present invention. Consideration of the foregoing in relation to this application is respectfully requested.

It is requested that the information disclosed herein be made of record in this application.

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria VA 22313.

Date of Deposit: 4-26-05

Typed Name: Christine M. Morrisette

Signature: Christine M. Morrisette

Respectfully submitted,

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Telephone No.: 978-264-6664

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Substitute for form 1449A/PTO  <b>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b> <i>(use as many sheets as necessary)</i>			<b>Complete if Known</b> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Application Number</td> <td>10/781,219</td> </tr> <tr> <td>Filing Date</td> <td>2/18/2004</td> </tr> <tr> <td>First Named Inventor</td> <td>Backes</td> </tr> <tr> <td>Art Unit</td> <td></td> </tr> <tr> <td>Examiner Name</td> <td>Not yet known</td> </tr> <tr> <td>Attorney Docket Number</td> <td>160-027</td> </tr> </table>		Application Number	10/781,219	Filing Date	2/18/2004	First Named Inventor	Backes	Art Unit		Examiner Name	Not yet known	Attorney Docket Number	160-027
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Attorney Docket Number	160-027															
Sheet	1	of	1													

U.S. PATENT DOCUMENTS					
Examiner Initials*	Cite No. <sup>1</sup>	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number - Kind Code <sup>2</sup> (if known)			
		US-5,963,848	10/05/1999	D'Avello	
		US-5,606,727	02/25/1997	Ueda	
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FOREIGN PATENT DOCUMENTS						
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		Country Code <sup>3</sup> - Number <sup>4</sup> - Kind Code <sup>5</sup> (if known)				

Examiner Signature	Date Considered
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<sup>1</sup>Applicant's unique citation designation number (optional). <sup>2</sup>See Kinds Codes of USPTO Patent Documents at [www.uspto.gov](http://www.uspto.gov) or MPEP 901.04.

<sup>3</sup>Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). <sup>4</sup>For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. <sup>5</sup>Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST. 16 if possible. <sup>6</sup>Applicant is to place a check mark here if English language Translation is attached.

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